# TESTIMONY OF H. "MAC" MCKEEVER, HEAD START DIRECTOR GENESEE COUNTY GCCARD HEAD START AND EARLY HEAD START PROGRAM

# BEFORE THE SUBCOMMITTEE ON EARLY EDUCATION OF THE COMMITTEE ON EDUCATION AND LABOR U.S. HOUSE OF REPRESENTATIVES

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Mr. Chairman Kildee, and Honorable Members of Congress, my name is Mac McKeever. I am a Head Start Director with the Genesee County Community Action Resource Department Head Start Program. We are the Head Start Grantee for the Genesee County area including Flint, Michigan.

I am pleased that you have allowed me the opportunity to testify on the importance of the Head Start Program. Head Start is a comprehensive family focused program for low-income families of children from birth to five years old. Our program serves 2087 families in the traditional Head Start program and 182 families in Early Head Start. As the Grantee, we directly serve 788 families in Early Head Start and traditional Head Start combined. We also delegate three school district's Head Start programs; the Flint Board of Education, Carman-Ainsworth Community Schools, and the Beecher Community Schools. The Grantee serves all other areas of Genesee County; 17 school districts, Job Corps, University of Michigan, Mott Community College and Workforce Investment Act's Job's Training Center. We have sites at the YWCA and our administration building that also enrolls children of college students.

Head Start is a special, unique program and is unlike regular Pre-Kindergarten programs, childcare, or other Early Childhood Education programs. These are all worthwhile and good programs that meet the needs of the families with the resources they receive. Head Start is a Comprehensive Family and Child focused program. It provides a wide range of services to the young child and the other members of their family unit. It has a totally different approach than other Early Childhood programs.

We in Genesee County, Flint, Michigan see every day how important this multi-focused comprehensive program is in our area.

Flint, Michigan and Genesee County face many challenges. Some are: the THIRD HIGHEST VIOLENT CRIME CITY IN THE NATION, the Delphi Corporation's bankruptcy, massive General Motors' layoffs, we consistently have one of the highest unemployment rates in the nation. The unemployment rate as of December 2006 was at 7.8%. The Head Start program and its staff are on the front lines of meeting the needs of these at risk families. Over 16,703 children in Genesee County under the age of 5 years old live below the poverty level. Sadly, the situation seems only to be getting more desperate. Our unemployment rates grow daily as more and more good paying jobs leave our community. This is not to say that Genesee County and Flint do not have many honest, hardworking families in our community.

With these higher paying jobs disappearing, many of our families are now working at low paying service jobs like McDonald's where they are not paid well and have no health benefits at all. As a result, health care services are critically important.

- a. In 2003, 18% of children in our community age 19 to 35 months had not been fully immunized.
- b. More than 15% of pregnant women do not receive prenatal care in their first trimester.
- c. More than 10.4% of babies are born at a low birth weight.
- d. 3.8% of babies receive inadequate or no prenatal services at all.

Many families are also having a difficult time finding stable housing. We see many families who have moved more than three times in a year because they cannot afford the rent. There are also a large segment of children and families sharing housing. Extended families and adult children are returning to their parent's home bringing their families with them. Grandparents are now many times parental substitutes.

Many times, the parents in our families have dropped out of high school, been involved with the juvenile justice system or may have had other negative contact with the traditional social service and education network. This results in their avoidance and mistrust of the system that can help them. Head Start develops trust, support, and allows parents input into the program. Through these things, positive change develops and families become self-sufficient. We make parents feel that it is their program, not just another part of the system.

Because of the incredible needs of the families we serve, Head Start cannot afford to focus solely on the educational development of the children we serve. Making sure that our children are ready to learn includes providing support for the entire family. These are the most vulnerable, highest risk families we can identify. Our caseworkers help families locate emergency housing, food assistance, and many other needed services. Our program partners with several job-training programs in our local area so that we can help laid off/unemployed workers get the skills they need to move forward. Many of these are past Delphi, General Motors, or related industry low seniority employees with 15 years mostly. Training programs provide parents with employment skills in areas such as building and apartment maintenance, janitorial, dental hygiene, optical technician, etc. We work closely with the Workforce Investment Act and the local Job Corps. We have partnerships with local colleges to aid parents in returning to school. We have a physical site at these college locations, which provides on-site access to families. A partnership with the YWCA and a center located at our administrative office also provides centers that focus on colleges and training programs.

There are other important services that are unique to Head Start, i.e., we provide family, child and adolescent support services through our

- 1. Mental Health Services
- 2. Health Services
- 3. Dental Services
- 4. Nutrition Services Teaching parents how to prepare low cost, healthy meals.
- 5. Special Needs and Disabilities

- 6. Social Services component
- 7. Parent education and training. We also address child and adult literacy through our adult literacy curriculum, training for adults in literacy education, child literacy curriculum, etc.
- 8. We also involve parents in shared decision making affecting key areas of the program, i.e. budget, personnel, program self-evaluation, etc. This process THAT includes informed participation in the shared decision making process also becomes a growth and confidence building experience for the parents. We go into parents' homes, have parent meetings and policy council meetings each month. Parents also volunteer in the classroom.

This type of contact enables Head Start to develop trust and become aware of the families' needs and the emergencies they may have. We can then support the child and family unit appropriately.

We help families identify health care resources and establish a "medical home" for themselves and for their children by partnering with community health centers in the area, such as the Hamilton Community Health Clinic, the public hospitals and Mott Children's Health Center, etc. Health care continues to be a significant community concern. The majority of local medical and dental providers do not accept public assistance or Medicaid. These services are even more difficult to obtain for the adult and even child dental needs.

We have children that come to Head Start hungry. Many lack fresh fruit and vegetables at home and simply are not receiving nutritious meals. Head Start plays a vital role in keeping children healthy by providing each child with nutritious snacks and hot meals that they may not be getting at home. We also see children that are suffering from obesity. Child obesity is an epidemic in the United States and a very difficult area to address. We work with parents to help them provide healthy meals in their home while shopping on a budget and teach them about the benefits of regular exercise.

We are finding that many of our children are demonstrating and acting out behavioral problems in the classroom and at home. Our program works with these children and provides counseling and referrals to specialists when they are needed. We have trained mental health service professionals. The Social Service and Mental Health Staff visit the classrooms throughout the year, either by request of the teacher or parent. They observe children with behavioral problems and attempt to provide child management techniques, intervention and staff support to modify the negative behavior. In the more severe situations, we refer to local psychologists, community mental health agencies, etc. and then collaborate follow-up with the family. We are finding that aggressive and sometimes harmful behavior is on an increase in our community. Staff work with parents on emotional, family and substance abuse problems. We establish trust and rapport at the classroom level and start analyzing the problem. We then identify and clarify the concerns and take the family to available agencies that service that concern. These same services are also available and utilized by the adult family members, siblings, etc.

More than 10% of our children also face difficult special needs and disabilities. They range from speech and hearing impaired, deaf, blind, physically challenged and children with serious learning disabilities. Our program provides early intervention screenings for all children. We want to make sure that all the children we serve get the attention they need to succeed in school. We refer many of these children to Early On.

We see rising domestic violence with a rate of 4,021 cases reported in 2005 alone. Classes are offered to the parents on Anti-Violence techniques throughout the year. These sessions include safety techniques, conflict resolution methods, alternative discipline strategies, etc. This focus is intended to address our community problem with violent crime and antisocial child behavior.

We pride ourselves on our Male Involvement program. We believe that fathers play a critical role in the lives of their children and we want to create as many opportunities as possible for fathers to reconnect with their children and family. We provide a 14 week, male nurturing series, support classes, and special events with child and father i.e. Bowling events, Field trips, etc.

To enable our Head Start to better serve the families in our local community, we provide a wide spectrum of delivery models. We offer and provide a double session option, Full Day Head Start, a home base model, evening Head Start sessions, Early Head Start classroom and home base programming. We try to meet the needs of our families by utilizing maximum local resources to provide flexible programming.

In Genesee County, we also provide family support another way—by empowering parents to get involved in the classroom and in the shared governance of the program. We believe strongly that the parent is the prime educator of their children. We encourage parents to get involved with the parent policy councils—the parents share in decision-making areas in the Head Start Program. I have been working with low-income children and families for quite some time. In my experience, I have found that the parent policy council provides parents with the opportunity to take control of their own life as well as their children. I personally was a community representative on the GCCARD Policy Council in 1978-1979 and since have been employed as a director with Head Start.

We conduct extensive training for parents on the policy council and often find many hidden talents in parents when we give them a chance. Many of our policy council parents are very good at looking at our budget. Every year, I receive calls from former parents who tell me that the policy council and Head Start helped turn their lives around. Many are now in college or working and some parents have even been elected to their local school boards and other elected offices.

While the educational and academic areas of Early Childhood are important, I want to emphasize that meeting the needs of the entire family is essential. Head Start works because it is a true comprehensive program and the services we provide to families are what make the difference and set us apart!

Unfortunately, for the past few years, Head Start and other services for families and children have had their funding level either frozen or reduced. In some cases, many new requirements, reports, and regulations have clogged up the road to serving families and caused an actual reduction in direct services. This has caused significant staff turnover due to lack of competitive salaries, fringe benefits and caseload increases. In our area, family service staff serves 60 to 90 families each. Children and their parents have to once again develop a level of trust with new staff, which can take some time to develop. We are hoping that Congress will provide Head Start with an increase in funding so that we can continue to provide the highest quality services.

I know that you are in the process of drafting the new Head Start Authorization. Based on my experience, I would like to make five recommendations for the committee to consider:

- 1. Continue to strengthen the comprehensive nature of Head Start. Remember that Head Start's success is based on providing services to both children and their families. Particularly family social services and additional mental health services are needed. The last five years have focused almost exclusively on academics, assessments, measurements and the child's educational progress.
- 2. Head Start needs a significant increase in funding. The last few years have been very difficult and as a result, services to children and families are suffering.
- 3. Do not weaken the role of the parent policy council. Shared governance works and works well. Parental involvement is one of the cornerstones of the program. I believe that the policy council gives parents a chance to have a real say over their children's lives and empowers them in the process. This truly is shared decision making by informed parents.
- 4. Provide Head Start programs the flexibility to serve the communities they live in. I support increasing the income eligibility guidelines to 130% of the poverty line so more working families can enroll. I also support allowing programs the flexibility to serve more infants and toddlers who need services and allowing programs to provide more full day options.
- 5. Current monitoring appears to be an attempt to dismantle Head Start. Is that what is intended? I hope not!

I would like to thank the committee for giving me the opportunity to testify today. I am more than happy to answer any questions you might have.

See attached Local Success Stories.

Let me provide you with some examples of success stories from our program.

#### Example 1

One of our four year olds was severely disruptive and noncompliant in the classroom. Because of this, he and many others were not able to take advantage of all the learning in the classroom. Our Mental Health Specialist worked with the parent, teacher and child. The parent was bipolar and self-medicating with alcohol and street drugs. Her behavior and lifestyle were contributing to her son's emotional problems in the classroom. Our Mental Health Specialist worked with the mother to get her the help she needed. At the present time, this child is able to fully take advantage of all the classroom has to offer and his severe behaviors are nonexistent. The other children in class are also benefiting from this one intervention. The teacher can now spend more time teaching and less time intervening on behalf of this child.

### Example 2

Our second story involves a four year old that our Mental Health Specialist suspected had symptoms that indicated an autism spectrum disorder. Teachers and parents saw this child as "just stubborn." Our Mental Health Specialist helped the teacher and parents to reframe the behavior and realize it for what it was. She worked with the teacher and the parents to reduce the "stubborn" behavior. At the present time, this child is thriving in our Head Start classroom and not receiving any outside services.

#### EXAMPLE 3

A Head Start Parent cannot begin to express her appreciation for the Genesee County C.A.R.D. Head Start program for helping to save her daughter, from serious harm. It was upon a routine physical exam, required for entry into the Head Start program, where it was discovered that the Head Start child had lead poisoning of a level 10. The parent was grateful that her daughter's lead poisoning was discovered before the level increased. The child could have suffered from severe developmental impairments had it gone undetected. Thankfully, the parent received resources to prevent any increase in the child's level. "If it wasn't for the physical required by Head Start, I would not have had any reason to have my daughter tested...thank you!"

## EXAMPLE 4

A Head Start Family Service Worker has been working with a set of parents who both have developmental disabilities which effect their ability to function, especially in reading and comprehension. Within a week of the family entering the program, the child in our program was sent home with head lice. The worker called the family to be sure that they knew how to treat the problem. Upon learning that they did not know, she took the necessary equipment over to their home and walked the parents through the treatment steps.

A few months later, the same parents received notification that the assistance they were receiving through the Department of Human Services (DHS) was being terminated. The parents called the staff person for help with understanding the letter and then what to do about their situation. The staff person called the Center for Civil Justice for the family

and arranged a meeting with a lawyer who has taken this family's case. She transported the father to that meeting with the lawyer, took the father to obtain emergency food and a winter coat from a resource her supervisor provided, and helped the father fill out and understand the necessary paperwork to regain public assistance.

The Family Service Worker has advocated with the Center for Civil Justice to obtain a case manager to assist this family in their daily needs. Most recently, DHS has required the father to attend Work First, however, the family has no transportation. She contacted Work First for the family to arrange for transportation on a daily basis for this father to attend Work first as scheduled.